

ISSUE SLIP STATE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		25	05-28-92
FORMALITY REVIEW	XJ		7/26/99

INDEX OF CLAIMS

+ 1 0 0  
 ..... Rejected N ..... Non-elected  
 ..... Allowed I ..... Interference  
 (Through numeral)..... Canceled A ..... Appeal  
 ..... Restricted O ..... Objected

Claim	Date
Final Original	11-14-98
101	11-14-98
102	11-14-98
103	11-14-98
104	11-14-98
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149	11-14-98
150	11-14-98

Claim	Date
Final Original	11-14-98
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100	11-14-98

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149	11-14-98
150	11-14-98

BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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